

Form CPF M 102: Campaign Finance Report Municipal Form OCT 1

Office of Campaign and Political Finance

OCT 18 2013

of Massachusetts	File with: City or Town Clerk or Election Commission-
Fill in Reporting Period dates: Beginning Date:	
Type of Report: (Check one) ☐ 8th day preceding preliminary ☐ 8th day preceding election [30 day after election year-end report dissolution
Paul David Spector	Committee to Elect Paul Spector
Candidate Full Name (if applicable)	Committee Name
Northampton City Council, Ward 2	I odd KHAMSON
Office Sought and District	Name of Committee Treusurer
74 Massasoit St, Northampton, MA 01060	74 Massasoit Street, Northampton, MA 01060
Residential Address	Committee Mailing Address
Telephone Number (optional):	Telephone Number (optional):
SUMMARY BALANC	E INFORMATION:
Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	2025.
Line 3: Subtotal (line 1 plus line 2)	2025.
Line 4: Total expenditures this period (page 5, line	e 14) 342, 88
Line 5: Ending Balance (line 3 minus line 4)	1682.12
Line 6: Total in-kind contributions this period (page	ge 6) 283.12
Line 7: Total (all) outstanding liabilities (page 7)	9
Line 8: Name of bank(s) used: TD BAN	1K-MOKTHAMPTOW
activity, of all persons acting under the authority or on behalf of this committee in actinity and liabilities nor made any expenditures on my behalf during this reporting Candidate without Committee OR Candidate with independent activity filing se	contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: /o -/8 = 200 x only) best of my knowledge and belief, a true and complete statement of all campaign finance cordance with the requirements of M.G.L. c. 55. I have not received any contributions, a period. sparate report best of my knowledge and belief, a true and complete statement of all campaign
finance activity, including contributions, loans, receipts, expenditures, disbursements campaign finance activity of all persons acting under the authority or on behalf of thi	is committee in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury:	(Candidate's signature) Date: (07 F - 2016)

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
9/15/13	Robert Bissell 36 Maynard	4100	
9/20/13	DAN FEUTON 15 4th Avenue	\$100	
9(18/13	Eliot FRATILIAN 24 Massasoit St	\$100	
9/13/13	Kenny Hahm 25 Woodlaww	\$100	
9/18/13	Peter Harschman 15 montain Laurel Path	\$150	
9(10/13	Neil KUDLER 10 Jewett St	\$100	
9/11/13	KEVEN LAILE 35 WASHENGTON ST	4200	retired
9/11/13	DAVED MURPHY 76 Elm St	\$100	
9/12/13	DAVED HARKEWICZ 31 S. PARIL TENVOLL	\$100	
9/15/13	Merny Wasser 29 Aniowatow ST	\$100	
9/11/13	BOB REGLMAN 36 FAUT Street	\$100	
9/15/13	MARTY WOHL 1878 ELMST.	\$200	dentist-self-employed
Line 9: Total Rece	ipts over \$50 (or listed above)	1450	
Line 10: Total Receipts \$50 and under* (not listed above)		575	
	RECEIPTS IN THE PERIOD	2025	Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

Address	D 25 F 124		
	Purpose of Expenditure	Amount	
136 West St. Suite 102A MORRHAMIETON, MA	update votev Software files	*75	
<u> </u>		L	
31 Willow St. Florence, MA01062	design of Campaign newsletke	\$100	
Line 12: Total Expenditures over \$50 (or listed above)			
Line 13: Total Expenditures \$50 and under* (not listed above)			
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD			
	Jine 12: Total Expenditures over the state of the state o	Software files Plantimeron, mA 93 main St Plorence, mA 01062 31 Willow St. Plorence, mA 01062 Campaign newsletker Campaign newsletker Control of the state of the stat	

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
9/10/13	AL GRIGGS	10 BALLET Place	caterins of campaign event	141.56
9/10/13	SAWY GRIGGS	10 BARRET PLACE NORTHAMPTON, 01060	(1	141.56
		Line 15: In-Kind Contributions	over \$50 (or listed above)	283.12
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS	283.12

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
				,
				-
				,
-				y.,
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				Ø